DECLARATION AND POWER OF AN TORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. LEX-0129-USA

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Novel Human Membrane Proteins and Polynucleotides Encoding the Same

the specification of which i	s attached hereto unless the	following box is checked:
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()	was filed on _	as US Application Serial No.	or PCT International Application
	Number	and was amended on	(if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: NO:
			YES: NO:

Provisional Application

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I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:

APPLICATION SERIAL NUMBER	FILING DATE
60/180,414	2/4/2000

U.S. Priority Claim

Phereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each discharge the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

227 227 211 APPLICATION SERIAL NUMBER	FILING DATE	STATUS(patented/pending/abandoned)
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POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) listed below to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Lance K. Ishimoto, Reg. No. 41866

The Weedle-1- TV 77201	Send Correspondence to: Lance K: Ishimoto Lexicon Genetics Incorporated 4000 Research Forest Drive The Woodlands, TX 77381		DirectiTele Lance K. 1 (281) 863-3	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Gregory Donoho	Citizenship: <u>USA</u>
Residence: 95 Autumn Branch Drive, The Woodlands, TX 77382	
Post Office Address: Same	
Inventor's Signature	Date

DECLARATION AND POWER O TORNEY DOCKET NO. LEX-012 TORNEY FOR PATENT APPLICATION (contrided) Citizenship: USA Full Name of Inventor: Erin Hilbun Residence: 16222 Stuebner Airline, Spring, TX 77379 Post Office Address: Same Date Inventor's Signature Full Name of Inventor: Citizenship: Residence: Post Office Address: Inventor's Signature Date Citizenship: Full Name of Inventor: Residence: ___ Post Office Address: Date Énventor's Signature Full Name of Inventor: Citizenship: ____ Residence: Post Office Address: Fnventor's Signature Date Full Name of Inventor: Citizenship: Residence: ___ Post Office Address: Inventor's Signature Date Full Name of Inventor: Citizenship: ___ Residence: Post Office Address:

Inventor's Signature

Date